

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 16, 2005 8:00 am
Secretary of State

02-16-2005 90025 005 ****61.25

DOCUMENT # 748600

1. Entity Name

FAIRVIEW ISLES CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

6655 ESTERO BLVD.
FT. MYERS BEACH FL 33931-4549

Mailing Address

6655 ESTERO BLVD.
FT. MYERS BEACH FL 33931-4549

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2021017

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BENSON, WILLIAM
6645 ESTERO
#205
FORT MYERS BEACH FL 32931

7. Name and Address of New Registered Agent

Name

CATHERINE DONNELLY

Street Address (P.O. Box Number is Not Acceptable)

6655 ESTERO BLVD # 214

City

FORT MYERS BEACH

FL

Zip Code

33931

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2005

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	VENTURO, GENNARO	
STREET ADDRESS	6665 ESTERO BLVD #225	
CITY-ST-ZIP	FORT MYERS BEACH FL 33931	
TITLE	D	☒ Delete
NAME	BENSON, WILLIAM	
STREET ADDRESS	6645 ESTERO BLVD #205	
CITY-ST-ZIP	FORT MYERS BEACH FL 33931	
TITLE	VD	☐ Delete
NAME	MACPHEE, ROBERT	
STREET ADDRESS	6645 ESTERO BLVD. #101	
CITY-ST-ZIP	FORT MYERS BEACH FL 33931	
TITLE	TD	☐ Delete
NAME	BOTS, PATRICIA	
STREET ADDRESS	6645 ESTERO BLVD. #206	
CITY-ST-ZIP	FORT MYERS BEACH FL 33931	
TITLE	SD	☐ Delete
NAME	DONNELLY, CATHERINE	
STREET ADDRESS	6655 ESTERO BLVD. #214	
CITY-ST-ZIP	ORLAND PARK IL 60467 <i>FORT MYERS BEACH FL 33931</i>	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SHARON HORVATH	☐ Change ☒ Addition
NAME	5390 BRAINARD ROAD	
STREET ADDRESS	SOLON OH 44139	
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Gennaro Venturo, Pres.* **GENNARO VENTURO** 2-8-05 239-463-9538
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #